PTO/SB/06 (08-03)

Approved for use through 7/31/2006, OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application of Docket Number Substitute for Form PTO-875 8 CLAIMS AS FILED - PART I OTHER THAN (Column 1) (Column 2) SMALL ENTITY OR SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA RATE FEE BASIC FEE RATE FEE (37 CFR 1.16(a)) OR TOTAL CLAIMS (37 CFR 1.16(c)) mlnus 20 = OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 = X \$ OR X S MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) = OR * If the difference in column 1 is less than zero, enter *0* in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II O 💪 (Column 1) OTHER THAN (Column 2) OR (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST REMAINING NUMBER **PRESENT** RATE ENT ADDI-RATE ADDI-AFTER PREVIOUSLY **EXTRA** TIONAL AMENDMENT TIONAL PAID FOR FEE ENDME FFF Total Minus γ 20 (37 CFR 1.16(c)) X S OR Independent (37 CFR 1.16(b)) Minus = ₹ X \$ OR X S FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) + 4 OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST Φ REMAINING PRESENT NUMBER RATE ADDI-ENT RATE ADDI-AFTER PREVIOUSLY **EXTRA** TIONAL AMENDMENT TIONAL PAID FOR FEE **IENDME** FEE Total Minus = (37 CFR 1.16(c)) OR Independent (37 CFR 1.16(b)) Minus = OR X S FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST O REMAINING NUMBER PRESENT RATE ADDI-ENDMENT **AFTER** RATE ADDI-**PREVIOUSLY EXTRA** TIONAL AMENDMENT TIONAL PAID FOR Total (37 CFR 1.16(c)) FEE FEE Minus OR X \$ Independent (37 CFR 1.16(b)) Minus X S = OR X S FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)). OR + \$ TOTAL TOTAL ADD'L FEE OR ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1

is collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments and defining periodic properties of the southward application form to the OSE TO. Take was vary depending upon the manyard account of the you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

BEST AVAILABLE CONTRACTOR											
Application or Docker											ber
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 0 9 778 7/1											11.
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY				
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FOR		NUMBER FILED		NUMBER EXTRA		8/	NSIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS		18 minus 20=		. 0			X\$ 9=		OR	X\$18=	· :
INDEPENDENT CLAIMS		3 minus 3 =		. 0		•	X40=		OR	X80=	
LTIPLE DEPEN	RESENT					-135 =		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2							OTAL		OR	TOTAL	710
CLAIMS AS AMENDED - PART II 7-25-05 (Column 1) (Column 2) (Column 3)						8	OTHER THAN SMALL ENTITY OR SMALL ENTITY				
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12-05					(Column 3)				_		
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Independent • 3 Minus ••• 3 = FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ן ו	+135=		OR	+270=	
						_			1		}
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3-06	(Column 1)		(Colu	ımn 2)	(Column 3)	AC	TOTAL DOIT, FEE		OR	ADDIT. FEE	
-3-06	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	JMN 2) HEST MBER NOUSLY D FOR	(Column 3) PRESENT EXTRA) r		ADDI- TIONAL FEE	JOR	ADDIT. FEE	ADDI- TIONAL FEE
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